

MULTIPLE INDEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/541952

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	/		/				
2		/	/				
3	/		/				
4	/		/				
5	(2)		/				
6	(4)		/				
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TOTAL IND.	1		2				
TOTAL DEP.	19	↔	15	↔			
TOTAL CLAIMS	20	████████	17	████████			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
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100							
TOTAL IND.							
TOTAL DEP.		↔			↔		↔
TOTAL CLAIMS		████████		████████		████████	